SH-PR-004 (3/13/2013)

FACILITY USE PERMIT APPLICATION



TOWN OF SOUTHAMPTON PARKS & RECREATION DEPARTMENT

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★★★ PLEASE PRINT ★★★

1 111115		ILITY REQUESTED		
I. NAME OF PE	ERSON FILING APPLICATIO	DN:		
MAILING ADI	DRESS:		Email:	
PHONE: HO	ME	BUSINESS	FAX	
2. NAME OF O	RGANIZATION OR COMP	PANY:		
3. ACTIVITY PLA	ANNED:			
4. DATE(S) REG	UESTED:		S M T W TH F S PLEASE CIRCLE APPROPRIATE I	
TIME(S) REQ	UESTED: START	END		
			76-100 101-150 EST.# OF	VEHICLE
6. WILL A BEER	& WINE PERMIT BE REQU	ESTED? NO YES IF YES,	COMPLETE ALCOHOL PERMIT APPLI	CATION.
7. WILL A FEE B	E CHARGED FOR EVENT?	NO YES IF SO, HOW	MUCH?	
8. WILL A CATE	ERER BE USED? NO	YES IF YES, NAME:	PHONE:	
		=		
10. ARE YOU RE	QUESTING TO HAVE A CO	ONTAINED FIRE? NO YES	IF YES, DESCRIBE:	
	property losses or damag		all liability for personal injuries (includation with any activity or accommod	
this event. 13. I have read	the rules and regulations	ge occasioned by, or in connec	tion with any activity or accommod	ations fo
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